2002 INDIVIDUAL DECLARATION OF ESTIMATED INCOME TAX

FOR CALENDAR YEAR 2002 OR _____ MONTHS

MONTHS ENDING

CAN A TO THE STATE OF THE STATE

FOR OFFICIAL USE ONLY

A legally filed declaration must be signed, dated and accompanied by payment. The safest and easiest way to declare is to estimate this year's taxes based on last year's taxable income. Mail To: Cincinnati Income Tax Bureau P.O. Box 5487 Cincinnati, OH. 45201-5487 on or before APRIL 30,2002.

	Check one of the boxes below that identifies your business entity. INDIVIDUAL SOLE PROPRIETORSHIP SINGLE MEMBER LLC JOINT VENTURE OTHER (Specify)
INTEREST AND PENALTIES MUST BE ASS	SESSED FOR FAILURE TO FILE AND MAKE TIMELY PAYMENTS
1. ESTIMATED 2002 TAXABLE INCOME \$	X 2.1% = ESTIMATED TAX\$
2. LESS ALLOWABLE CREDITS, IF ANY	
	YOUR EMPLOYER
b. INCOME TAX NOT OVER 2.1% PAYABLE T	TO ANOTHER CITY BY A CINCINNATI RESIDENT
3. BALANCE OF 2002 ESTIMATED TAX PAYMENT	
The undersigned declares this to be a true, correct and complete declaration of estimated Cincinnati income tax for the year 2002.	4. DEDUCT OVERPAYMENT OF LAST YEAR'S TAX IF YOU REQUESTED TRANSFER ON YOUR 2002 RETURN
, 	5. BALANCE OF 2002 ESTIMATED TAX PAYMENT
SIGNATURE TITLE DATE	6. AMOUNT TO BE PAID WITH YOUR DECLARATION AT TIME OF FILING (1/4 of Line 1 minus Line 2)
EXPLANATION OF NE	EW TAXPAYER OR CHANGE OF TAX STATUS
AT THE PRESENT TIME DA BUSINESS LOCATION OR PLACE OF RESIDENCY	ATE BEGAN PRIOR TO PRESENT TIME FROM TO
TYPE BUSINESS OR OCCUPATION, ETC.	
EMPLOYER'S NAME	
BUSINESS CONDUCTED OR WORK DONE IN (CITY)	
	NFORMATION & INSTRUCTIONS
2002 DECLARATIO	ON AND RETURN PAYMENT CALENDAR
APRIL 30, 2002 FILE DECLARATION WITH 4 PAYMENT JULY 31, 2002 MAKE 2 ND QUARTERLY PAYMENT	OCT. 31, 2002 MAKE 3 RD QUARTERLY PAYMENT MAKE 4 TH QUARTERLY PAYMENT ANY BALANCE DUE.

Within four months after beginning a new business located or operating within the corporate limits of Cincinnati, or for existing businesses, within 4 months of the star of the tax year, the business must file a Declaration. If filing your first Declaration, offer an appropriate additional explanation above or by attachment. Please notify the tax office promptly of any later changes. If your form is blank, or your name, address and account number have been preprinted and the information shown is *not* correct, please make necessary changes in the boxes above.

The three months prior to the Declaration due date should provide a reasonably accurate basis from which most businesses can estimate the current year's income. An original estimate can and should be amended if subsequent events indicate it to be grossly in error. If impractical to base this year's estimate as suggested, refer to last year's actual taxable income as indicated on your return. An estimate based on an amount equal to or greater than the last full year's taxable income is insurance against any penalty on underestimating for Cincinnati purposes.

Make your own income and estimated tax entries on Line 1. If you overpaid last year's tax and requested transfer of same towards this year's estimated tax, enter the amount on Line 2. Then deduct it from Line 1 and enter the difference on Line 3.

Line 3 represents the net amount of your estimated tax payable this year either in full with the filing of this Declaration, or in installments as indicated by the payment calendar. Enter on Line 4 the amount of remittance accompanying your Declaration – and please retain records for future reference.

		D-1 QUARTERLY PAYMENT OF ESTIMATED NET PROFIT TAX				
FOR OFFICIAL USE ONLY		P O BOX 64	CINCINNATI INCOME TAX BUREAU P O BOX 640770 CINCINNATI OH 45264-0770			
Enter vo	ur name and address here		ACCOUNT NO:			
Enter yo	ur name ana adaress nere		FED ID NO:			
			SSN NO:			
			TAX RATE: 2.10%			
			QUARTER ENDING: MARCH 31, 2002			
			DUE DATE: APRIL	30, 2002		
AMOUNT D	UE: \$					
DATE	PHONE ()	SIGNATURE	Ξ	TITLE		
		D-1 QUARTERLY PAYS	MENT OF ESTIMA	TED NET PROFIT TAX		
			NATI INCOME TAX BUREA	U OOO		
			X 640770 NATI OH 45264-0770	2002		
EOD OFFICIAL LISE O	NII V					
FOR OFFICIAL USE O	NL1		ACCOUNT NO:			
Enter your name and address here			FED ID NO:			
			SSN NO:			
			TAX RATE: 2.10%			
			QUARTER ENDING: JUNE 30, 2002			
			DUE DATE: JULY 31, 2002			
AMOUNT D	UE: \$		DOLDINE. GOLL C	1, 2002		
		CICNATURE	7	TITLE		
DATE	PHONE ()_	SIGNATURE	<u> </u>	TITLE		
		D 1 OVA PERDA V DAVE				
		D-1 QUARTERLY PAY				
		P O BOX	NATI INCOME TAX BUREA X 640770 NATI OH 45264-0770	2002		
FOR OFFICIAL USE O	NLY	CINCIN	ACCOUNT NO:			
			FED ID NO:			
Enter your name and address here			SSN NO:			
			TAX RATE: 2.10%			
			QUARTER ENDING: SEPTEMBER 30, 2002			
			DUE DATE: OCTOE	BER 31, 2002		
AMOURTE	III. A					
AMOUNT D	UE: \$					

DATE______PHONE ()______SIGNATURE______TITLE____

D-1 QUARTERLY PAYMENT OF ESTIMATED NET PROFIT TAX

FOR OFFICIAL USE ONLY

CINCINNATI INCOME TAX BUREAU P O BOX 640770 CINCINNATI OH 45264-0770

ACCOUNT NO:

2002

FED ID NO:
SSNNO:
TAX RATE: 2.10%
QUARTER ENDING: DECEMBER 31, 2002
DUE DATE: JANUARY 31, 2003

AMOUNT DUE: \$

DATE_____PHONE ()_____SIGNATURE_____TITLE____